

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	I	49	6/11/01
FORMALITY REVIEW	B7	JC3-883	07-25-01
RESPONSE FORMALITY REVIEW			

Best Available Copy

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
- (Through numeral)	Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Final Original	Date
1	X	5/27/01
2	X	5/27/01
3	X	5/27/01
4	X	5/27/01
5	X	5/27/01
6	X	5/27/01
7	X	5/27/01
8	X	5/27/01
9	X	5/27/01
10	X	5/27/01
11	X	5/27/01
12	X	5/27/01
13	X	5/27/01
14	X	5/27/01
15	X	5/27/01
16	X	5/27/01
17	X	5/27/01
18	X	5/27/01
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29	X	5/27/01
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39	X	5/27/01
40	X	5/27/01
41	X	5/27/01
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If more than 150 claims or 10 actions
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